

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		7/21/93
EXAMINER	299	5-19
TYPIST	33	09
VERIFIER	212	6-9-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	3/10/96
2	6/16/96
3	9/16/96
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SYMBOLS

✓	Rejected
=	Allowed
- (Through numerial)	Cancelled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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